



CONNECTICUT WOMEN'S HEALTH CAMPAIGN

c/o Permanent Commission on the Status of Women
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The Connecticut Women's Health Campaign

African American Affairs
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American Heart Association
Celebrate Women at UCONN Health
Center
Children's Health Council
CT Association for Human Services
CT Association of School
Based Health Care
CT Breast Cancer Coalition, Inc.
CT Children's Health Project
CT Chronic Fatigue Immune
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CT Coalition Against
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CT Coalition for Choice
CT Community Care, Inc.
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CT NOW
CT Sexual Assault Crisis Services
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CT Women's Consortium, Inc.
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Hartford College for Women
Institute for Community Research
Latino and Puerto Rican
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National Association of Social
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Coalition CT
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of Nursing
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UCONN School of Allied Health
UCONN Women's Center
Urban League of Greater
Hartford, Inc.
Valley Women's Health
Access Program
Women & Family Life Center

Restoration of Medical Services for Medicaid and SAGA Recipients

The Problem

- The Connecticut Women's Health Campaign (CWHC) supports the restoration of medical services for people receiving Medicaid, State Administered General Assistance (SAGA), and General Assistance (GA). The Connecticut Women's Health Campaign has identified this as a priority issue because it is a vital service to offer affordable, accessible health insurance coverage for low-income, uninsured adults.
- As of January 1, 2003, adult Medicaid, SAGA and GA clients are no longer eligible to receive insurance coverage for services from podiatrists, chiropractors, naturopaths, physical therapists, speech pathologists, audiologists, and psychologists. Additionally, SAGA and GA clients are no longer eligible to receive insurance coverage for home health care providers and optometrists and opticians, including eyeglasses.
- If the Governor's "Budget Reduction Plan" for FY 2003 is implemented, the healthcare situation for Medicaid adults and SAGA/GA recipients will be further exacerbated. The Governor proposes a cut of \$11 million by limiting HUSKY A to parents at 100% of the federal poverty level instead of the current 150% and eliminating SAGA cash and medical benefits as of February 1, 2003.
- Efforts to restore Medicaid transportation for SAGA recipients, that were cut from the state budget in a previous legislative session, have been unsuccessful. Prior to the budget cut, non-emergency medical transportation was provided to extremely poor and medically compromised individuals.
- Cutting these services from the state budget leaves many people without services that make a crucial difference in their ability to stay safe, healthy and productive.

What Can Be Done?

- Restore Medicaid, State Administered Medical Assistance (SAGA), and town General Assistance (GA) medical coverage to include services by psychologists, naturopaths, chiropractors, physical, occupational and speech therapists and podiatrists.
- Restore SAGA and GA medical coverage to include eye care, optical hardware, optometry care and home health care.
- Restore SAGA medical transportation.
- Oppose proposals to limit HUSKY A enrollment for adults.
- Oppose proposals to eliminate SAGA and GA cash and medical benefits.

Information About Medicaid Adult and SAGA Recipients

- HUSKY A adult clients are parents or caretakers who have custody of a child enrolled in HUSKY and earn up to 150% of the federal poverty level, or pregnant women who earn up to 185% of the federal poverty level. Other adults with incomes under 100% of the federal poverty level are also eligible if they are older or disabled.
- SAGA and GA clients are adults who do not have enough income or savings to meet basic living expenses, and are unable to work because of a physical or mental illness that keeps them from working for at least 6 months. The vast majority of people receiving SAGA benefits receive medical benefits only.
- There are approximately 253,000 uninsured persons in the state of Connecticut; the rate of uninsured adults is approximately 8.5%. Among those who are uninsured, 11.3% have incomes below 100% of the Federal Poverty Level (FPL); 32% have incomes between 100% and 199% of FPL; 13% have incomes between 200% and 299% of FPL; and a surprising 43.4% have incomes over 300% of the federal poverty level. As many as 70% of those who lack health insurance are working and approximately 15% more are dependent children or spouses of workers; only 15% of the uninsured have no formal attachment to the labor force.ⁱ Because of this distribution of uninsured adults and dependents, Connecticut needs a multi-pronged strategy to provide access to health care coverage. Cutting services will only increase the number of uninsured persons in the state.
- Eliminating access to insurance coverage for low-income adults will only produce illusory savings to the state. These individuals will delay obtaining healthcare treatment until an emergency arises and then seek services at an emergency room. Hospitals will then seek additional funding from the state to cover these emergency care services.

For more information, contact:

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ⁱ Lewin Group Analysis of Current Population Survey, U.S. Census, March 2002 Supplement, prepared for the Connecticut Health Advancement and Research Trust (CHART).